Wharton County Junior College

Personnel Action Form

Human Resources

Banner ID # / @	Last Name	First	Middle Initial	Telephone
	Byrd, David A.			

Address / City / State / Zip

Part I: Check *all* that apply

Classification			
◉ Administrative/Professional Staff ○ Faculty ○ Support Staff		☑ New Employee ☐ Extension ☐ Salary Adjustment ☐ Separation (date:_____)	☐ Other (explain)
○ Temporary ◉ Regular	◉ Full-Time ○ Part-Time		

Part II: Assignment/Accounting Number of months/weeks below notes how the position is funded; it does not guarantee employment status for a person. All Administrative/Professional and Faculty (Contract) and Support Staff (Non-Contract) employees are employed according to WCJC Policies and Procedures. Support Staff employees are at-will employees.

CURRENT Division/Unit:

Job Vacancy No.: (if applicable)

Job Title/Position:

Specialized Area:

Budgeted Position? ○ Yes ○ No

Funded in which FY?

Budget Number:

Position No. (NBAPOSN):

Compensation:			Hourly Rate: (Part-time only)
$	○ Annual ○ Hourly ○ Other (explain)	Sched _____ Grade _____ Step _____	$ _____ per hr x _____ hrs/wk x _____ wks = $ _____ per year

Start Date:	End Date:		If temporary, anticipated termination date:
		○ At-will-employee ○ Per contract	

Position is funded for the following number of months/weeks:
○ 9 months ○ 10 ½ months ○ 12 months ○ Other (specify)

PROPOSED Division/Unit:
Administration

Job Vacancy No.: (if applicable)
2507 A 026

Job Title/Position:
Vice President of Access, Completion, and Transfer

Specialized Area:
Access, Completion, and Transfer

Budgeted Position? ◉ Yes ○ No

Name of Replaced Employee: n/a

Funded in which FY? FY26

Budget Number: 1110-1306-6093-6082

Position No. (NBAPOSN): ADV006

Compensation:			Hourly Rate: (Part-time only)
$ 150,117	◉ Annual ○ Hourly ○ Other (explain)	Sched VP Grade 13 Step 112	$ n/a per hr x n/a hrs/wk x n/a wks = $ n/a per year

Start Date:		If temporary, anticipated termination date:
10/22/25 10/27/25 KW	☐ At-will-employee ☑ Per contract	n/a

Position is funded for the following number of months/weeks:
○ 9 months ○ 10 ½ months ◉ 12 months ○ Other (specify)

Explanation of Action:

Part III: Position/Budget Authorization

Recommended by Supervisor/Department Head — Date	Approved by Dean — Date
Approved by Division Chair — Date	Approved by Vice President — Date Amanda A. Allen Digitally signed by Amanda A. Allen Date: 2025.09.30 14:16:06 -05'00'
Approved by Cabinet Level Supervisor — Date	Reviewed by Human Resources — Date 10-2-25
Budget Approval — Date Cynthia Ward 10.1.25	Approved by President — Date 10/07/25

Reg. 821 HR Requisition Number A 2509 0029

Revised May 29, 2014